BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Δ	pplication	or	Docket	Num	har
-	DDNCallOH	OI.	DOCKEL	110111	NEI

		CI VIME	AC EII ED	PART I							—
			AIMS AS FILED - PART I (Column 1) (Column 2)		1	SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
FO	DR ———	NUM	MBER FILED	NUMBER	EXTRA	ſſ	RATE	FEE		RATE	FEE
BASIC FEE		X+ 12				***************************************		345.00	OR		690.00
то	TAL CLAIMS	4	4 minus 20= *			X\$ 9=		OR	X\$18=	256	
IND	EPENDENT CL	AIMS	e minus:	3 = *	·	1 · [X39=		OR	X78=	28
MULTIPLE DEPENDENT CLAIM PRESENT						1	+130=		OR	+260=	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	15X1
	CI	_AIMS_AS	S AMENDED	- PART II			JIAL		1 OL	OTHER	THAN
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)			(Column 3)		SMALL	ENTITY	OR	SMALL E		
IENT A		CLAIMS REMAINING AFTER AMENDMEN	G	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT		*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	1	*	Minus	***	= -	1 [X39=		OR	X78=	
•	FIRST PRESE	NTATION OF	MULTIPLE DEF	PENDENT CLAIM		ŀţ	+130=		OR	+260=	
						L	TOTAL		י בו	TOTAL	ļ
		(0:1		(Column 5)	(Column or		ADDIT. FEE	L	OR ,	ADDIT. FEE	L
		(Column CLAIMS		(Column 2) HIGHEST	(Column 3)	, 		ADDI-	, ,		ADDI-
ENT B		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***	=	t	X39=		OR	X78=	
_	FIRST PRESE	NTATION OF	MULTIPLE DEF	PENDENT CLAIM	1	1	±120			+260=	<u> </u>
		•				L	+130= TOTAL		OR	+260= TOTAL	
	•				•	Α	ADDIT. FEE		OR	ADDIT. FEE	
	Section 19 Management	(Column	1)	(Column 2)	(Column 3)	·			, .		
AMENDMENT C		CLAIMS REMAININ AFTER AMENDMEI		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	=		X39=			X78=	
A	FIRST PRESE	NTATION O	F MULTIPLE DE	PENDENT CLAIM	1	1			OR		
	16 46		on the sect.	Imp G write for:	olumn o		+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
l	The "Highest Num	nber Previoush	y Paid For" (Total o	r Independent) is th	e highest numbe	er fou	nd in the ap	propriate bo	x in co	olumn 1.	